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| Please recognize the following address as the correspondence address: Customer Number 24353 OR Request for Customer Number (PTO/SB/125) submitted herewith. | | | | | | |
| In the following listed application(s) or patent(s): | | | | | | |
| Patent Number (if appropriate) | | Application Number | | Patent Date (if appropriate) | | U.S. Filing Date |
| | | 09/782,757 | | | | February 12, 2001 |
| Typed or Printed Name Signature | Name Paula A. Borden | | | | (check one) Applicant or Patentee Assignee of record of the entire interest. Statement under 37 CFR | |
| Date September 3, 2004 | | | | | 3.73(b) is enclosed. (Form PTO/SB/96) Attorney or Agent of Record | |
| Address of Signer | 200 Mid | VIC, FIELD & FRANCE Idlefield Road, Suite Park, California 940 | 200 | LP S | | or Agent of Record 42,344 (Reg. No.) |
| Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below *. | | | | | | |
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